



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION  
DIVISION OF TEACHER QUALITY AND URBAN EDUCATION  
MISSOURI MINORITY TEACHING SCHOLARSHIP PROGRAM  
P.O. BOX 480, JEFFERSON CITY, MISSOURI 65102

8-790-002  
5-01  
PRINT OR TYPE

**APPLICATION FOR MISSOURI MINORITY TEACHING SCHOLARSHIP**

**competitive**

**INSTRUCTIONS ►** RETURN THIS APPLICATION ALONG WITH ALL OFFICIAL TRANSCRIPTS, (TEST SCORES AND CLASS RANK HIGHLIGHTED), AND THE THREE RECOMMENDATION FORMS TO THE ABOVE ADDRESS.

**APPLICATIONS MUST BE POSTMARKED BY FEBRUARY 15.**

**TO BE COMPLETED BY APPLICANT**

NAME		SOCIAL SECURITY NUMBER		
HOME ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (     )
COUNTY	DATE OF BIRTH	DESE USE ONLY		
NAME OF PARENT/GUARDIAN				
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (     )
ETHNIC GROUP <input type="checkbox"/> AFRICAN AMERICAN ____ % <input type="checkbox"/> ASIAN AMERICAN ____ % <input type="checkbox"/> HISPANIC AMERICAN ____ % <input type="checkbox"/> NATIVE AMERICAN ____ %				SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
IN ORDER OF PREFERENCE, LIST THE COMMUNITY COLLEGES OR 4-YEAR COLLEGE OR UNIVERSITY THAT YOU WOULD ATTEND IF YOU WERE AWARDED A SCHOLARSHIP. THESE INSTITUTIONS MUST HAVE AN APPROVED TEACHER EDUCATION PROGRAM, AND PARTICIPATE IN THE MMTS PROGRAM.  (1) _____ (2) _____				
IN WHICH GRADE LEVELS WOULD YOU PREFER TO TEACH? <input type="checkbox"/> ELEMENTARY <input type="checkbox"/> MIDDLE SCHOOL <input type="checkbox"/> JUNIOR HIGH SCHOOL <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> OTHER (SPECIFY) _____				
IN WHAT SUBJECT AREA WOULD YOU PREFER TO SPECIALIZE?		HIGH SCHOOL/INSTITUTION CURRENTLY ATTENDING		TELEPHONE NUMBER (     )
ACT SCORE	HS CLASS RANK	CUMULATIVE HS GPA	DESE USE ONLY	
CURRENT ACADEMIC STATUS (CHECK) <input type="checkbox"/> HIGH SCHOOL SENIOR <input type="checkbox"/> COMMUNITY COLLEGE OR 4-YEAR COLLEGE/UNIVERSITY FRESHMAN <input type="checkbox"/> COMMUNITY COLLEGE OR 4-YEAR COLLEGE/UNIVERSITY SOPHOMORE <input type="checkbox"/> COLLEGE/UNIVERSITY JUNIOR <input type="checkbox"/> COLLEGE/UNIVERSITY SENIOR <input type="checkbox"/> RETURNING ADULT STUDENT ____ HOURS COMPLETED <input type="checkbox"/> BACCALAUREATE DEGREE IN _____ TOTAL COLLEGE HOURS COMPLETED _____ CUMULATIVE GPA _____				
SIGNATURE OF APPLICANT INDICATES VERIFICATION OF CURRENT STUDENT STATUS			DATE	

PLEASE COMPLETE AN ESSAY WHICH INCLUDES THE FOLLOWING: 1) WHY YOU DESIRE TO ENTER THE TEACHING PROFESSION AND YOUR IDEAL TEACHING/CLASSROOM SITUATION; YOUR ESSAY SHOULD BE NO MORE THAN 250 WORDS AND SHOULD BE PRINTED OR TYPED. PLEASE LIST THE FOLLOWING: 2) SCHOOL AND COMMUNITY ACTIVITIES; 3) LEADERSHIP ROLES; 4) HOBBIES AND INTERESTS; AND 5) EMPLOYMENT EXPERIENCES. YOU MAY ATTACH A RESUME WHICH INCLUDES ITEMS 2 THROUGH 5 AND COMPLETE YOUR ESSAY ON ITEM 1 ONLY.